

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY /  /

Full Name of Payee <b>Active Engagement</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2020
Mailing Address 113 East Market St Suite 300		Amount 3000.00
City Leesburg	State VA	Zip Code 20176
Purpose of Expenditure Media Placement	Category/ Type	Transaction ID : SE.23349 Date of Disbursement or Obligation MM / DD / YYYY 10 / 19 / 2020
Name of Federal Candidate FLETCHER, ELIZABETH, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Active Engagement</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2020
Mailing Address 113 East Market St Suite 300		Amount 8000.00
City Leesburg	State VA	Zip Code 20176
Purpose of Expenditure Media Placement	Category/ Type	Transaction ID : SE.23350 Date of Disbursement or Obligation MM / DD / YYYY 10 / 19 / 2020
Name of Federal Candidate DAVIS, WENDY, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	11000.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

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Date

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10 / 20 / 2020

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>Active Engagement</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 19 / 2020</b>
Mailing Address 113 East Market St Suite 300		Amount <b>9410.90</b>
City Leesburg	State VA	Zip Code 20176
Purpose of Expenditure Media Placement	Category/ Type	Transaction ID : <b>SE.23351</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 19 / 2020</b>
Name of Federal Candidate KULKARNI, SRI PRESTON, ,		Office Sought: <input checked="" type="checkbox"/> House District: <b>22</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Active Engagement</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 19 / 2020</b>
Mailing Address 113 East Market St Suite 300		Amount <b>8000.00</b>
City Leesburg	State VA	Zip Code 20176
Purpose of Expenditure Media Placement	Category/ Type	Transaction ID : <b>SE.23352</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 19 / 2020</b>
Name of Federal Candidate VALENZUELA, CANDACE, ,		Office Sought: <input checked="" type="checkbox"/> House District: <b>24</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>17410.90</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>i360</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 19 / 2020</b>
Mailing Address <b>P.O. Box 37046</b>		Amount <b>750.00</b>
City <b>Baltimore</b>	State <b>MD</b>	Zip Code <b>21297-3046</b>
Purpose of Expenditure Dialer Access (estimate)	Category/Type	Transaction ID : <b>SE.23347</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 19 / 2020</b>
Name of Federal Candidate <b>ROY, CHIP, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House District: <b>21</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought <b>232923.98</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>i360</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 19 / 2020</b>
Mailing Address <b>P.O. Box 37046</b>		Amount <b>750.00</b>
City <b>Baltimore</b>	State <b>MD</b>	Zip Code <b>21297-3046</b>
Purpose of Expenditure Dialer Access (estimate)	Category/Type	Transaction ID : <b>SE.23348</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 19 / 2020</b>
Name of Federal Candidate <b>DAVIS, WENDY, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House District: <b>21</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought <b>233673.98</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>1500.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Nebo Media</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 20 / 2020</b>	
Mailing Address <b>PO Box 9625</b>		Amount <b>33000.00</b>	
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22219</b>	Transaction ID : <b>SE.23353</b>
Purpose of Expenditure Digital Media Production / Digital Media Placement		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 19 / 2020</b>
Name of Federal Candidate <b>CUNNINGHAM, CAL, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b>
Calendar Year-To-Date Per Election for Office Sought <b>377125.90</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Nebo Media</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 20 / 2020</b>	
Mailing Address <b>PO Box 9625</b>		Amount <b>348900.00</b>	
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22219</b>	Transaction ID : <b>SE.23354</b>
Purpose of Expenditure Digital Media Production / Digital Media Placement		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 19 / 2020</b>
Name of Federal Candidate <b>BIDEN, JOSEPH R JR, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <b>4521943.24</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>381900.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00530766       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Nebo Media</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 20 / 2020</div> </div>	
Mailing Address PO Box 9625		Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>34100.00</span> </div>	
City Arlington	State VA	Zip Code 22219	<b>Transaction ID : SE.23356</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 19 / 2020</div> </div>
Purpose of Expenditure Digital Media Production / Digital Media Placement		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate KELLY, MARK, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>415573.24</span> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____

Full Name of Payee <b>Nebo Media</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 20 / 2020</div> </div>	
Mailing Address PO Box 9625		Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>5000.00</span> </div>	
City Arlington	State VA	Zip Code 22219	<b>Transaction ID : SE.23357</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 19 / 2020</div> </div>
Purpose of Expenditure Digital Media Production / Digital Media Placement		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate BULLOCK, STEVE, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MT</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>73355.30</span> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>39100.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00530766       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Nebo Media</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 20 / 2020</div> </div>	
Mailing Address PO Box 9625		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">39250.00</div>	
City Arlington	State VA	Zip Code 22219	<b>Transaction ID : SE.23358</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 19 / 2020</div> </div>
Purpose of Expenditure Digital Media Production / Digital Media Placement		Category/Type	
Name of Federal Candidate PETERS, GARY, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">427033.21</div>		2020	

Full Name of Payee <b>Nebo Media</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 20 / 2020</div> </div>	
Mailing Address PO Box 9625		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">28450.00</div>	
City Arlington	State VA	Zip Code 22219	<b>Transaction ID : SE.23359</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 19 / 2020</div> </div>
Purpose of Expenditure Digital Media Production / Digital Media Placement		Category/Type	
Name of Federal Candidate GREENFIELD, THERESA, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">257743.55</div>		2020	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">67700.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">518610.90</div>

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